

LEGAL SEPARATION WITH CHILDREN

4

The Court Order

**Part 4: To get the Legal Separation Order
(Forms Packet)**

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SELF SERVICE CENTER
COURT ORDER FOR LEGAL SEPARATION

**Part 4: Court Order for Legal Separation With Children
(Forms Only)**

How to assemble these documents

This packet contains court forms for the court order for a legal separation with children. Be sure the documents are in the following order:

Order	File Number	Title	No. Pp.
1	DRLSC8ft	Table of forms in this packet	1
2	DRLSC8k	Checklist: Legal Separation Decree	1
3	DRLSC81f	<i>“Decree of Legal Separation”</i>	10
4	DRS12f	<i>“Parent’s Worksheet for Child Support Amount”</i>	7
5	DRS81f	<i>“Child Support Order”</i>	4
6	DRS82f	<i>“Order of Assignment”</i>	1
7	DRS88f	<i>“Current Employer Information”</i>	1
8	DRCVG11f	<i>“Parenting Plan”</i>	5
9	DRS89f	<i>“Judgment Data Sheet”</i>	1

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SELF SERVICE CENTER

LEGAL SEPARATION DECREE WITH CHILDREN

CHECKLIST

Use the forms and instructions in this packet only if the following factors apply to your situation:

- ✓ You or your spouse filed a Petition for Legal Separation with children AND,
- ✓ You and your spouse have children with each other OR the wife is pregnant by the husband or will be pregnant by the husband before the legal separation is over AND,
- ✓ You (and your spouse if you are proceeding by consent) have completed the court papers about custody, parenting time (formerly known as "visitation"), and child support and have attended the Parent Information Program class and have filed your certificate with the Clerk of the Court AND,
- ✓ You are ready to complete the court papers about the Legal Separation Decree AND,
- ✓ You are going to a default hearing, or you both agree on the legal separation terms, or you are going to a legal separation trial.

READ ME: It is very important for you to know that when you sign a court document, you may be helping or hurting your court case. Before you sign any court document, or get involved with a court case, it is important that you see a lawyer to make sure you are doing the right thing. The Self-Service Center has a list of lawyers who can give you legal advice and can help you on a task-by-task basis for a fee. If you want to know more about our list of lawyers and our list of mediators, ask the Self-Service Center staff.

Name or Lawyer's Name: _____ (A)
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number: _____
State Bar Number: _____
Representing ☐ Self (Without a Lawyer) OR ☐ Petitioner or ☐ Respondent

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Marriage of: (B)

Case Number: _____ (C)

(Name of Petitioner)

DECREE OF LEGAL SEPARATION (With Children)

(Name of Respondent)

☐ By Consent (D)
☐ By Default
☐ After Trial

THE COURT FINDS: (E)

1. This case has come before this court for a final Decree of Legal Separation. The court has taken all testimony needed to enter a Decree, or the court has determined testimony is not needed to enter the Decree.
2. This court has jurisdiction over the parties under the law, and the provisions of this Decree are fair and reasonable under the circumstances, and are in the best interests of the minor children as to custody, parent access (visitation), and support.
3. **The Court finds that:**
 - a. **Residency Requirement.** At the time this action was filed, one of the parties lived in Arizona, or had lived in Arizona while a member of the United States Armed Forces.
 - b. **Conciliation Court.** The provisions of A.R.S. 25-381.09 relating to Conciliation Court either do not apply or have been met.
 - c. **Live Apart.** The marriage is irretrievably broken or the parties desire to live separate and apart.
 - d. **No Objection.** The other party does not object to the Decree of Legal Separation.
 - e. **Custody, Support, Spousal Maintenance/Support, Division of Property and Debt.** Where it has the legal power and where it is applicable to the facts of this case, this Court has considered, approved, and made Orders relating to issues of child custody, parenting time (visitation), child support, spousal maintenance/support (alimony), and the division of property and/or debts.
 - f. **Community Property and Debt.**
☐ The parties did not acquire any community property or debt during the marriage, **OR**
☐ The parties have agreed to a division of community property and/or debt as evidenced by their signatures on Exhibit A attached to and incorporated into this Decree, **OR**
☐ There is no agreement as to division of community property and debt, but all community property and debt is divided pursuant to this Decree.
 - g. **Pregnancy.**
☐ Wife is not pregnant, **OR**
☐ Wife is pregnant, and the husband ☐ IS OR ☐ IS NOT the father of the child.
 - h. **Spousal Maintenance/Support**
☐ The Petitioner, **OR** ☐ the Respondent lacks enough property, including property given to

him or her as part of this divorce, to provide for his or her reasonable needs, and is unable to support himself or herself through an appropriate job, or he or she is providing the primary care to a child(ren) of young age or is of a condition that they should not be required to look for work outside the home, or lacks earning ability necessary to support himself or herself, or contributed significantly to the educational opportunities of the other spouse, or had a marriage that lasted a long time and is of an age that may severely limit the possibility of getting a job to support himself or herself.

i. Parent Information Program:

1. Petitioner ☐ has attended the Parent Information Program class as evidenced by the Certificate of Completion in the court file. OR
Petitioner ☐ has not attended the Parent Information Program class and ☐ shall be denied any requested relief to enforce or modify this decree until Petitioner has completed the class.
2. Respondent ☐ has attended the Parent Information Program class as evidenced by the Certificate of Completion in the court file. OR
Respondent ☐ has not attended the Parent Information Program class and ☐ shall be denied any requested relief to enforce or modify this decree until Respondent has completed the class.

j. Deviation from Child Support: The court, having considered the best interests of the child(ren), deviates from the guidelines for the following reasons:

- ☐ Application of the guidelines is inappropriate
- ☐ Application of the guidelines is unjust
- ☐ The parties have signed a written agreement with knowledge of the amount of support that would have been ordered by the guidelines but for the agreement.

The court makes the following finding regarding the deviation:

- ☐ The child support order would have been \$ _____
- ☐ The child support order after deviation is \$ _____
- ☐ All parties have signed the agreement free of duress and coercion.

k. ☐ Physical Custody Adjustment, Court Approved Discretionary Parenting time Adjustment and/or Other Adjustments. (The court must make written findings if any of these adjustments are made.) _____

The court finds that the person responsible for paying child support has the ability to pay child support

- ☐ In the amount entered on Line 34 of the Worksheet for \$ _____
- ☐ In an adjusted amount calculated using the self-support reserve on line 35 of the Worksheet for \$ _____

l. Custody of Minor Child(ren). (Check/complete only if custody is contested or joint custody is ordered.)

- ☐ The custody order or agreement is in the best interests of the child(ren) for the following reasons: (List the reasons.)

REASONS: _____

m. **Supervised or No Parenting Time.** (Check and complete only if supervised or no parenting time is ordered.)

☐ Supervised parenting time between the children and ☐ Petitioner **OR** ☐ Respondent, or no parenting time by ☐ Petitioner **OR** ☐ Respondent, is in the best interests of the child(ren), for the following reasons: (Explain the reasons)

REASONS: _____

n. **Domestic Violence.** If the court enters an order for joint custody of the child(ren), check box 1 or box 2 and explain.

1. ☐ Domestic violence has not occurred during this marriage, OR
2. ☐ Domestic violence has occurred, but the domestic violence has not been significant. Explain why joint custody is in the best interest of the child(ren) even though domestic violence has occurred: _____

THE COURT ORDERS: (F)

1. **LEGALLY SEPARATED.** The parties are legally separated.

2. **ENFORCEMENT OF TEMPORARY ORDERS:** All obligations ordered to be paid by the parties in Temporary Orders dated (fill in dates of ALL temporary orders here) _____
☐ are satisfied in full or ☐ judgment is awarded against the party with the obligation with the highest legal interest allowed by law in the total amount of \$ _____.

3. **SPOUSAL MAINTENANCE/SUPPORT:**

- a. ☐ Neither party shall pay spousal maintenance/support (alimony) to the other party, **OR**
b. ☐ Petitioner, OR ☐ Respondent is ordered to pay ☐ Respondent or ☐ Petitioner the sum of \$ _____ per month spousal maintenance/support **BEGINNING THE FIRST DAY OF THE MONTH** after this Decree is signed. Each payment shall be made by the first day of each month after that and shall continue until the receiving party is deceased or until (date) _____. All payments shall be made through the Clerk of this Court/ Clearinghouse by automatic wage assignment, until all required payments have been made under this Decree. Payments made shall be included in receiving spouse's taxable income and is tax deductible from the paying spouse's income as required by law.

4. **PROPERTY, DEBTS AND TAX RETURNS:**

- a. ☐ Petitioner is ordered to pay all debts unknown to Respondent, AND
☐ Respondent is ordered to pay all debts unknown to Petitioner, AND
☐ Each party is ordered to pay his or her debts that he or she incurred since the date the parties' separated, _____.
b. ☐ Other orders and relief relating to community property or debt are contained in Exhibit A, which is attached and incorporated into this Decree.

- c. ☐ Each party is assigned his or her separate property.
- d. ☐ This Decree can be used as a transfer of title and can be recorded. Parties shall sign all documents necessary to complete all transfer of title ordered in this Decree, such as motor vehicles, houses, and bank accounts. The parties shall transfer all real and personal property as described in Exhibit A to the other party on or before _____ by 5:00 p.m.

If the party required to transfer the property has not transferred the property to the party entitled to receive the property on or before the date and time listed above, the party entitled to receive the property is entitled upon application to a Writ of Assistance or Writ of Execution to be issued by the Clerk of the Court commanding the sheriff to put him or her in possession of the property.

- e. ☐ For previous calendar years, the parties will file
- ☐ joint federal and state income tax returns and hold the other harmless from 1/2 of all additional income taxes if any and other costs, and each will share equally in any refunds, OR
- ☐ separate federal and state income tax returns.

AND

- ☐ This calendar year and continuing thereafter, each party shall file
- ☐ joint federal and state income tax returns and hold the other harmless from 1/2 of all additional income taxes if any and other costs, and each will share equally in any refunds, OR
- ☐ separate federal and state income tax returns.

AND

- ☐ Each party shall give the other party all necessary documentation to file all tax returns.

5. CHILD CUSTODY, PARENT CHILD ACCESS, AND CHILD SUPPORT:

a. PREGNANCY:

- ☐ A child who is common to the parties is expected to be born this date: _____
All orders below as to custody, parenting time (visitation), support, and medical insurance/expenses include this child and all other children named below.

b. CHILDREN: This Decree includes all minor children common to the parties as follows:

NAME OF CHILD

Date of Birth/Social Security Number

c. CHILD CUSTODY:

1. ☐ **SOLE CUSTODY:** Sole custody of the minor child(ren) is awarded to:
- ☐ Petitioner, OR ☐ Respondent, subject to parenting time as follows:
- ☐ Parenting time to the parent not having custody, according to the terms of the Parenting Plan attached as Exhibit B and made a part of this Decree. OR

☐ **Supervised parenting time** to ☐ Petitioner OR ☐ Respondent according to the terms of the Parenting Plan attached as Exhibit B. Parenting time may only take place in the presence of another person, named below or otherwise approved by the court.
Name of supervisor: _____
Restrictions on visitation: _____

The cost of supervised parenting time will be paid by:
☐ Petitioner OR ☐ Respondent OR
☐ shared equally by the parties.

OR

☐ **No parenting time** rights to ☐ Petitioner OR
☐ Respondent.

OR

2. ☐ **JOINT CUSTODY:** Petitioner and Respondent agree to act as joint custodians of the children, as set forth in the Joint Custody Agreement/Parenting Plan by the parties, signed by both parties and attached to this Decree as Exhibit B. There have been no significant acts of Domestic Violence by either parent. The Court adopts the terms of the Joint Custody Agreement/Parenting Plan describing the custody and parenting time agreement between the parties. By attaching the Joint Custody Agreement/Parenting Plan to the Decree, the Agreement becomes part of the Decree and carries the same legal weight as the Decree.

d. **CHILD SUPPORT:** ☐ Petitioner, OR ☐ Respondent shall pay child support to the other party in the amount of \$ _____ per month, beginning **THE FIRST DAY OF THE MONTH** following the date this Decree is signed by the judge. All child support payments shall be made through the Clerk of the Court/Clearinghouse, and must include the statutory fee. The support obligation will end for each child when that child reaches age 18, OR if that child is still attending high school until graduation or until the end of high school attendance, OR the child is otherwise emancipated, OR the child's death.

e. **MEDICAL AND DENTAL INSURANCE, PAYMENTS, AND EXPENSES:** This payment shall be made according to the Child Support Order. ☐ Petitioner, OR ☐ Respondent is ordered to provide medical and dental insurance for the minor child(ren). The party ordered to pay must keep the other party informed of the insurance company name, address, and telephone number, and must give the other party the documents necessary to submit insurance claims.

FURTHER,

☐ Petitioner is ordered to pay _____ %, AND
☐ Respondent is ordered to pay _____ %
Of all reasonable uncovered and/or uninsured medical, dental, prescription, and other health care charges for the minor child(ren), including co-payments.

f. **FINANCIAL INFORMATION EXCHANGES:** The parties shall exchange financial information (tax returns, spousal affidavits, earning statements and/or other related financial statements) every twenty-four months.

- g. **TAX EXEMPTION:** The parties shall claim as income tax dependency exemptions on federal and state tax returns as follows. A party required to pay child support is only entitled to claim a child(ren) as an income tax dependency exemption if that parent has paid all of the child support due and owing for the year that party is entitled to the exemption:

Parent entitled to claim

☐ Petitioner ☐ Respondent
☐ Petitioner ☐ Respondent
☐ Petitioner ☐ Respondent
☐ Petitioner ☐ Respondent

Name of child

Tax year

- h. **CHILDREN TO WHOM THIS DECREE DOES NOT APPLY:** It is ordered that ☐ Petitioner, OR ☐ Respondent has no legal obligation or right to the child(ren) born during the marriage but not common to the marriage. These children include: (Use additional paper if necessary)

Name: _____ **Birth date:** _____
Name: _____ **Birth date:** _____
Name: _____ **Birth date:** _____
Name: _____ **Birth date:** _____

Child expected to be born this date: _____

6. **LIMITATION ON JURISDICTION:** This court cannot make a legal order, without personal service on Respondent, with respect to issues of child support, medical and dental insurance, payments, expenses for the minor children, community property or debt, or spousal maintenance/support.
7. **OTHER ORDERS.** (List any other orders.) _____

DONE IN OPEN COURT: _____.(G) _____
JUDGE OR COURT COMMISSIONER

IMPORTANT. READ ME. Arizona law (ARS 35-503(I)) states that, with certain exceptions, an unpaid child support order that became a judgment by operation of law (this means that it became a judgment when it was due and unpaid) expires three years after the emancipation of the last remaining un-emancipated child who was included in the court order unless it is reduced to a formal written judgment by the court. The person who is owed child support must apply in writing to the court to obtain a formal written judgment.

APPROVED BY:

Petitioner: _____ Date: _____

Subscribed and sworn to me by the Petitioner, this _____ day of _____, _____

My Commission Expires _____

Notary Public

If you are filing a Consent Decree or if there has been a trial, the Respondent must sign:

Respondent: _____ Date: _____

Subscribed and sworn to me by the Respondent, this _____ day of _____, _____

My Commission Expires: _____
Notary Public

If either party is represented by a lawyer, the lawyer must sign:

Petitioner's Lawyer: _____ Date: _____

Respondent's Lawyer: _____ Date: _____

(If you are the Petitioner and you have a Default Hearing, and the Respondent was served with the court papers by signing an Acceptance of Service, or by Registered Process Server or Sheriff, you must mail or give a copy of the Decree to the Respondent after the Judge has signed it. You must tell the court you will do this.)

By signing below, Petitioner promises that a copy of the Decree will be mailed to Respondent.

A copy of the Decree will be mailed to the Respondent at the following address:

Respondent's Name: _____

Address: _____

City, State, Zip Code: _____

Petitioner's signature: _____

Date: _____

EXHIBIT A: COMMUNITY PROPERTY AND DEBTS (H)

Instructions: You must be specific. You must describe the property and/or debt that should go to or be paid by you and then check that box. You must describe the property and/or debt that should go to or be paid by the other party and then check that box. For example, under household furnishings you could say, blue and white living room sofa, and then check the box to say whether it should go to you or to the other party. Never list an item and then check both the Petitioner box and the Respondent box.

8a. DIVISION OF COMMUNITY PROPERTY:

☐ The following community property is awarded to each party as follows:

8b. LIST OF PROPERTY

☐ Household furniture/furnishings

AWARD TO:
Petitioner Respondent

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

<input type="checkbox"/>	Appliances	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	VCR	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	TV	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>

<input type="checkbox"/>	Personal Computer	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Stereo	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	State Income Tax Refund	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Federal Income Tax Refund	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Motor vehicle _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Motor vehicle _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Motor vehicle _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Cash, bonds of _____	<input type="checkbox"/>	<input type="checkbox"/>
	_____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	Award each party the personal property in his or her possession.		
<input type="checkbox"/>	Continued on reverse side or see attached list.		

8c. DIVISION OF RETIREMENT, PENSION, DEFERRED COMPENSATION

(WARNING. You should see a lawyer about your retirement, pension, deferred compensation, 401k plans and/or benefits. If you do not see a lawyer regarding these assets, you risk losing any interest you have in these plans and/or benefits. There are certain documents the plan administrator must have. Only a lawyer can help you prepare these documents.)

<input type="checkbox"/>	Award each party his or her interest in any retirement benefits, pension plans, or other deferred compensation described as:
	Petitioner's : _____
	Respondent's: _____
	OR
<input type="checkbox"/>	The Plan Administrator and the parties have approved the Qualified Domestic Relations Order (QDRO) attached as Exhibit(s) _____. Do not check this box without first seeking the help of a lawyer.

- OR
- ☐ Each party **WAIVES AND GIVES UP** his or her interest in any retirement benefits, pension plan, or other deferred compensation of the other party:
- ☐ Signature of Petitioner: _____
- ☐ Signature of Respondent: _____
- OR
- ☐ Neither party has a retirement, pension, deferred compensation, 401K Plan and/or benefits.

8d. DIVISION OF REAL PROPERTY. Section A is for one piece of property. Section B is for another piece of property. If you own more than two pieces of property, check the box below and attach another sheet of paper with the information requested in A and B.

- A. Real property located at (address) _____ which is legally described as: (You must provide the legal description. The legal description can be found on the deed to the property. If you do not provide the legal description, you may have to come back to court to amend the Decree to include the legal description.)

LEGAL DESCRIPTION: _____

The real property as described above is:

- ☐ Awarded to ☐ Petitioner OR ☐ Respondent as his or her sole and separate property.

OR

- ☐ Shall be sold and the proceeds divided as follows:

_____ % or \$ _____ to Petitioner.

_____ % or \$ _____ to Respondent.

- ☐ Petitioner or ☐ Respondent has signed a Quit Claim Deed quit claiming and transferring all right, title and interest to the real property to the other party. A copy of which is attached as Exhibit C. The Deed shall be recorded after the Judge signs the Decree.
- ☐ _____ is appointed real estate commissioner to sell this real property.

- B. Real property at (address) _____ which is legally described as: (You must provide the legal description. The legal description can be found on the deed to the property. If you do not provide the legal description, you may have to come back to court to amend the Decree to include the legal description.)

LEGAL DESCRIPTION: _____

The real property as described above is:

- ☐ Awarded to ☐ Petitioner OR ☐ Respondent as his or her sole and separate property.

OR

- ☐ Shall be sold and the proceeds divided as follows:

_____ % or \$ _____ to Petitioner.

_____ % or \$ _____ to Respondent.

- ☐ ☐ Petitioner or ☐ Respondent has signed a Quit Claim Deed quit-claiming and transferring all right, title and interest to the real property to the other party. A copy of which is attached as Exhibit D. The Deed shall be recorded after the Judge signs the Decree.
- ☐ _____ is appointed real estate commissioner to sell this real property.

8e. DIVISION OF DEBTS. (You should see a lawyer about how to divide secured and unsecured debts.)

- ☐ The following community debts shall be divided as follows:

Creditor(s)	Amount owed	Petitioner	Respondent
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____
_____	\$ _____	_____	_____

- ☐ Continued on reverse side or attached list.
- ☐ Any debts or obligations incurred by either party before the following date _____ that are not identified in the list above or attached shall be paid by the party who incurred the debt or obligation and that party shall indemnify and hold the other party harmless from such debts.

SIGNATURES:(I)

Date: _____ Approved by Petitioner: _____

Subscribed and sworn to me by the Petitioner, on this _____ day of _____, _____

My Commission Expires: _____
Notary Public

If you are filing a Consent Decree or if there has been a trial, the Respondent must also sign:

Date: _____ Approved by Respondent: _____

Subscribed and sworn to me by the Respondent, on this _____ day of _____, _____

My Commission Expires: _____
Notary Public

If either party is represented by a lawyer, the lawyer must sign:

Date: _____ Approved by Petitioner's Lawyer: _____

Date: _____ Approved by Respondent's Lawyer: _____

(1) Person Filing: _____
Mailing Address: _____
City, State, Zip: _____
Daytime Phone: _____
Evening Phone: _____
Representing: ☐ Self ☐ Attorney
State Bar Number: _____

SUPERIOR COURT OF ARIZONA
IN _____(2) COUNTY

(3) _____)
Petitioner/Plaintiff,)
_____))
_____))
DOB _____ SSN _____)
VS. _____)
_____))
(4) _____)
Respondent/Defendant,)
_____))
_____))
DOB _____ SSN _____)

Case No. (5) _____

ATLAS No. _____

**PARENT'S WORKSHEET
FOR CHILD SUPPORT AMOUNT**

Prepared By:
(6) ☐ Father ☐ Mother
☐ Court ☐ State

MONTHLY GROSS INCOME

Total Monthly Gross Income

(7) Estimated/Attributed to: ☐ Father ☐ Mother
(Explanation is required on the sheets following
the signature page at Item 7)

Adopted by Court ☐ Yes ☐ No

Father

Mother

_____ (8) _____

ADJUSTMENTS TO MONTHLY GROSS INCOME

(Can be an addition or deduction)

Court-Ordered Spousal Maintenance Actually Received +/- Paid _____ (9) _____

Court-Ordered Child Support Actually Paid or _____ (10) _____

Contributed for Children of Other Relationships _____ (11) _____

Cost of Supporting Children of Other Relationships _____ (12) _____

(Explanation is required on the sheets following the
signature page at Item 11)

Adjusted Monthly Gross Income for Each Parent

(add or subtract lines 9 through 11 from line 8)

COMBINED ADJUSTED MONTHLY GROSS INCOME

Add both amounts from line 12 together.

(13) _____

Need Help with the calculations? Call 602-506-3762 for an appointment for assistance at the Phoenix, Surprise, or Mesa courthouse locations. Ask for the "Calculations Department."

BASIC CHILD SUPPORT OBLIGATION

Number of children for whom support is requested: (14) _____
provide details on the sheets following the
signature page at Item 14)

Basic Child Support Obligation (from the Schedule) (15) _____

ADJUSTMENTS FOR NECESSARY EXPENSES

You may need to complete items 30-31; (Explanation is required
on the sheets following the signature page.)

	<u>Father</u>	<u>Mother</u>
Medical/Dental Insurance Costs for Children	_____ (16)	_____
Child Care Costs	_____ (17)	_____
Adjusted for Tax Credit	_____ (17a)	_____
Extra Education Costs	_____ (18)	_____
Extraordinary/Special Needs Child Costs	_____ (19)	_____
Court-Ordered Visitation/Exchange Costs	_____ (20)	_____
Number of Child(ren) 12 and Over _____ 0 - 10% _____	(21)	_____
Total Adjustments for Necessary Expenses	(22)	_____

TOTAL CHILD SUPPORT OBLIGATION

Total Child Support Obligation (add lines 15 and 22) (23) _____

EACH PARENT'S PERCENTAGE (%) OF COMBINED INCOME

	<u>Father</u>	<u>Mother</u>
Calculate for each parent:		
Parents' Adjusted gross income (from line 12)	_____ (24)	_____
Combined adjusted gross income (from line 13)	_____ (25)	_____
Parents' Adjusted gross income DIVIDED BY combined adjusted gross income EQUALS	_____ % (26)	_____ %

EACH PARENT'S PERCENTAGE (%) OF THE TOTAL SUPPORT OBLIGATION

Calculate for each parent:

Total child support obligation (from line 23)	_____ (27)	_____
Percentage of combined adjusted gross income (from line 26)	_____ % (28)	_____ %

Percentage TIMES the total obligation EQUALS the amount of the parent's support obligation _____ (29) _____

COMPLETE THIS SECTION FOR COSTS PAID BY THE NON-CUSTODIAL PARENT:

Father

Mother

ADJUSTMENT FOR COSTS ASSOCIATED WITH VISITATION

Requested Adjustment to be completed for paying parent **ONLY**

Using ☐ Table A Or ☐ Table B

Number of Visitation Days _____ Per year (Explain on page 7)

Visitation Table Percentage _____ X Line 15 = _____ (30) _____

MEDICAL INSURANCE MONTHLY PREMIUM ADJUSTMENT

Enter the monthly amount of the medical/dental insurance premium paid directly to an insurance carrier by the non-custodial parent (from line 16) [Guidelines 11] _____ (31) _____

CHILD CARE ADJUSTMENT

Enter the monthly amount paid directly by the non-custodial parent for work-related child care. (From line 17a) _____ (31) _____

EXTRA EDUCATION ADJUSTMENT

Enter the monthly amount paid directly by the non-custodial parent for extra education costs agreed upon by both parents or ordered by the court. (From line 18) _____ (31) _____

EXTRAORDINARY/SPECIAL NEEDS CHILD ADJUSTMENT

Enter the monthly amount paid directly by the non-custodial parent for costs associated with special needs of gifted or handicapped children. (From line 19) _____ (31) _____

COURT-ORDERED VISITATION/EXCHANGE ADJUSTMENT

Enter the monthly amount paid directly by the non-custodial parent for costs associated with court-imposed supervised exchanges. (From line 20) _____ (31) _____

ADJUSTMENTS SUBTOTAL

Add lines 30 and 31. _____ (32) _____

PRELIMINARY CHILD SUPPORT AMOUNT

Deduct line 32 from line 29. _____ (33) _____

IF YOU HAVE SOLE CUSTODY, PERFORM THE SELF-SUPPORT RESERVE TEST (LINE 36) AND GO TO LINE 38.

IF YOU HAVE ALTERNATIVE CUSTODY ARRANGEMENTS, COMPLETE EQUAL TIME SHARING (LINE 34) OR MULTIPLE CHILDREN (LINE 35) SECTIONS AND THE SELF SUPPORT RESERVE TEST (LINE 36); THEN GO TO LINE 38.

	<u>Father</u>	<u>Mother</u>
<u>EQUAL TIME SHARING WHEN INCOMES ARE NOT EQUAL</u>		
Prepare a Parent's Worksheet where neither party receives a visitation adjustment. Determine which parent has the lower support amount on line 33, deduct the lower amount from the higher amount, divide that amount in half. The resulting amount is paid by the parent with the higher preliminary child support amount to the parent with the lower preliminary child support amount. Explain on the sheets following the signature page.	_____ (34)	_____

<u>MULTIPLE CHILDREN, DIVIDED CUSTODY</u>		
Prepare a Parent's Worksheet to determine support for children in the Mother's household and a separate worksheet for children in the father's household. Determine which parent has the lower support amount from line 33, deduct the lower amount from the higher amount. The resulting amount is paid to the parent with the lower obligation. Explain your calculations on the sheets following the signature page.	_____ (35)	_____

<u>SELF-SUPPORT RESERVE TEST</u>		
Paying parent's Adjusted Gross Income from line 12	_____ (12)	_____
Minus reserve	(\$710) (36a)	(\$710)
Minus arrears	() (36b)	()
RESULT	_____ (37)	_____

If the amount from line 37 above is less than the Preliminary Child Support Amount, line 33, the court MAY order the resulting amount as child support order on line 37, absent a deviation.

<u>AMOUNT TO BE ORDERED BY THE PARENT ORDERED TO PAY BASED ON THESE CALCULATIONS</u>		
Enter the lesser of the amounts shown on line 33, 34, 35 or 37.	_____ (38)	_____

<u>DEVIATION FROM THE GUIDELINES SUPPORT AMOUNT</u>		
If you believe the Guidelines support amount is too high or too low in your case, enter the amount which you believe the court should order as child support in this case. Explain why on the sheets following the signature page.	_____ (39)	_____

RESPONSIBILITY FOR VISITATION-RELATED TRAVEL EXPENSES

Enter on this line the amount or percentage you think each parent should pay towards the travel/transportation expenses associated with visitation. The allocation of travel expenses does not change the amount of the support ordered. Explain on the sheets following the signature page.

_____ (40) _____

RESPONSIBILITY FOR MEDICAL EXPENSES NOT PAID BY INSURANCE

Father

Mother

Percentage of uninsured medical expenses that each parent should pay.

_____ (41) _____

I have read this document, and the facts are true and correct to the best of my knowledge or belief.

Date _____

Signature of Person Filing (42)

State of Arizona)
)ss.
County of _____)

Acknowledged before me on this date: _____

My Commission Expires: _____

Notary Public or Clerk

I have read this document, and the information provided is an accurate representation of the facts as supplied to me by _____.

Date: _____

Attorney Filing

BASIS FOR AMOUNTS SHOWN ON WORKSHEET

(7) Estimated/Attributed Income - Explain why you believe the other party is or could be earning the amount you indicated. Be as specific as possible. See the instructions for item 7 for examples. (Guidelines 4.e.)

(11) Cost of Supporting Children of Other Relationships - List the names and ages of the natural or adopted children for whom you are requesting an adjustment and describe the support you provide for these children. [Guidelines 5.a., 5.b., and 5.c.]

(11 – cont.) Name(s)

Date(s) of Birth(s)

Social Security Number(s)

(14) Children for whom Support is Requested - List the name(s) and age(s) of the natural or adopted child(ren) for whom you are requesting support.

Name(s)

Date(s) of Birth

12 or over
Y / N

Social Security Number(s)

(17) Child Care Costs - If the custodial parent's income is in excess of the chart in Guidelines 8.b.1., the court may adjust the cost of day care in order to apportion the dependent care tax credit benefit. The court may reduce the annualized amount of day care by 25% with a maximum monthly reduction of \$50 per month for one child, \$100 per month for two or more children.

Custodial Parent

Monthly Child
Care Costs

X

Number
of months

= Annual
Cost

X .75

= Adjusted
Cost

÷ 12

= Adjusted
Monthly Cost

X

_____ =

X .75

= _____

÷ 12

= _____

Non-custodial Parent

Monthly Child
Care Costs

X

Number
of months

= Annual
Cost

÷ 12

= Adjusted
Monthly Cost

X

_____ =

÷ 12

= _____

(21) Child 12 and Over - Follow the worksheet instructions for item 21. Explain why you need extra money to support the child(ren) age 12 and over. (Guidelines 8.b.2.)

(30) Adjustment for Costs Associated with Visitation - Calculate the number of visitation days per year. (Guidelines 10)

Extended periods _____ days

Weekend periods _____ days

Holidays periods _____ days

Midweek periods _____ days

School breaks _____ days

Other periods _____ days

Upon proof that certain costs usually incurred in the custodial household are NOT substantially or equally shared by both parents, Visitation Table B must be used. Explain the basis of the requested adjustment:

(34) Equal Time Sharing, Unequal Incomes – ***IF*** the amount entered on Line 38 was taken from Line 34, show how you arrived at the amount on line 38: (Guidelines 10)

Enter the Higher of the two amounts listed on line 33: _____

Enter the Lower of the two amounts listed on line 33: _____

Subtract the Lower amount. The Result is: _____

Divide the Amount of the Result by 2 (Result ÷ 2) = _____

(35) Multiple Children, Divided Custody – ***IF*** the amount entered on Line 38 was taken from line 35, show how you arrived at the amount on line 38. (Guidelines 14)

Enter the Higher of the two amounts listed on line 33: _____

Enter the Lower of the two amounts listed on line 33: _____

Subtract the Lower amount. The Result is: _____

(39) Deviation From the Guidelines Support Amount - If you believe the Guidelines support amount is too high or too low in your case, explain why. **READ THE GUIDELINES GENERALLY AND SECTION 18 IN PARTICULAR.** (This does not include physical custody adjustments; those are considered in item 30.) Show the total support amount you believe should be ordered. A deviation can only be ordered if the court makes appropriate findings. [Guidelines 18]

Requested Support Amount: \$ _____

(40) Visitation-Related Travel Expenses - Describe the anticipated visitation plan and related travel/transportation costs. The court may consider how the conduct of each parent has contributed to such costs. Explain how you think the cost should be divided between the parents. Enter the amount or percentage you think each parent should pay on line 38. The allocation of travel expenses does not change the amount of the support ordered. (Guidelines 16)

Federal Tax Exemption - Explain how you want the tax exemptions for the child(ren) allocated and the reason for such an allocation. [Guidelines 26]

SUPERIOR COURT OF ARIZONA
(1) MARICOPA COUNTY

(3) _____)
Petitioner/Plaintiff, _____)
_____)
DOB _____ SSN _____)
vs. _____)
(4) _____)
Respondent/Defendant, _____)
_____)
DOB _____ SSN _____)

Case No. (2) _____

ATLAS No. _____

CHILD SUPPORT ORDER

THE COURT FINDS THAT:

1. The parties have a duty to support the following child(ren):

Name(s) Date(s) of Birth(s) Social Security Number(s)

(14) _____

2. The parties' circumstances are as follows:

FATHER

MOTHER

COMBINED

Gross Monthly Income	_____ (8)	_____	_____
Spousal Maintenance/Support Paid	_____ (9)	_____	_____
Child Support for Other Children Paid	(_____) (10)	(_____)	_____
Adjustment for Supporting Other Children	(_____) (11)	(_____)	_____

Adjusted Monthly Gross Income	_____ (12)	_____ (13)	_____
Basic Child Support Obligation		(15)	_____

Adjustments to Child Support Obligation:

Medical/Dental Insurance Premium	_____ (16)	_____
Child Care	_____ (17)	_____
Adjusted for Tax Exemption	_____ (17a)	_____
Extra Education	_____ (18)	_____
Court-ordered Visitation/Exchange	_____ (19)	_____
Extraordinary Child	_____ (20)	_____
Child(ren) 12 or Older	(21) _____	
0 - 10% _____		
Total Adjustments	(22) _____	

Total Monthly Child Support Obligation (23) _____

Each Parent's Proportionate Share of Income	_____ % (26)	_____ %
Each Parent's Support Obligation	_____ (29)	_____
Adjustment for Costs Associated with Visitation	(_____) (30)	(_____)
Using <input type="checkbox"/> Table A <input type="checkbox"/> Table B		

Medical/Dental Insurance Premium Adjustment () (31a) ()
Child Care Adjustment () (31b) ()
Extra Education Adjustment () (31c) ()
Extraordinary Child Adjustment () (31d) ()
Visitation/Exchange Adjustment () (31e) ()

Adjustments Subtotal _____ (32) _____

Preliminary Child Support Amount _____ (33) _____

Equal Time Sharing, Unequal Incomes _____ (34) _____

Multiple Children, Divided Custody _____ (35) _____

Self Support Reserve Test

Paying party's Adjusted Gross Income
from line 12 _____ (12) _____

Minus reserve (\$710) (36a) (\$710)

Minus arrears () (36b) ()

RESULT _____ (37) _____

If the amount from line 37 above is less than the Preliminary Child Support Amount, line 33, the court MAY order the resulting amount as child support order on line 37, absent a deviation.

AMOUNT TO BE ORDERED: _____ (38) _____

3. Paying Party's employer/payor is:

Name: _____

Payroll Dept. Address: _____

4. Written Findings for Physical Custody Adjustment and/or Other Adjustments: _____

5. The court finds that the paying party has the ability to pay child support in the amount from line 38:
\$ _____

6. The court, having considered the best interests of the child(ren), deviates from the guidelines for the following reason(s):

- ☐ Application of the guidelines is inappropriate.
☐ Application of the guidelines is unjust.
☐ The parties have signed a written agreement with knowledge of the amount of support that would have been ordered by the guidelines but for the agreement.

The court makes the following findings regarding the deviation:

- ☐ The child support order would have been \$ _____
- ☐ The child support order after deviation is \$ _____
- ☐ All parties have signed the agreement free of duress and coercion.
- ☐ _____

IT IS ORDERED THAT:

- A. The ☐Petitioner ☐Respondent shall pay child support of \$ _____ per month to the other party. The first payment is due on ____/____/____. If this is a modification of child support, all other prior orders of this court not modified herein remain in full force and effect.
- B. The court finds that an arrearage exists in the amount of \$ _____ for the period of time of ____/____/____ to ____/____/____. The ☐Petitioner ☐Respondent shall pay an arrearage payment of \$ _____ per month to the other party with the first arrearage payment due on ____/____/____.
- C. All payments shall be made through the Support Payment Clearinghouse pursuant to an Order of Assignment assigned this date. At any time the paying party's employer/payor is not paying pursuant to an Order of Assignment, the paying party must make full and timely payment directly to:

Support Payment Clearinghouse
P.O. Box 52107
Phoenix, AZ 85072-2107

Payments not made through the Clerk of the Court/Clearinghouse shall be considered gifts unless otherwise ordered. Payments must include the case number and the paying party's name.

IMPORTANT NOTICE: Under state law (section 25-503, subsection I, Arizona Revised Statutes) the right to collect unpaid child support payments ends three years after the last child included in the child support order *emancipates. To collect the unpaid support, the person owed child support must file a court action to obtain a written judgment for the unpaid amount due before the end of the three year period. (Limited exceptions exist and are found in A.R.S. § 25320.B.).

*A child is emancipated: On the date of the child's marriage.
 On the child's 18th birthday.
 When the child is adopted.
 When the child dies.
 When the support obligation is terminated by court if support is extended beyond the age of 18.

- D. Unless the court has ordered otherwise, the parties affected by this order shall notify the Clerk of the Court/Clearinghouse of their addresses and shall notify the Clerk/Clearinghouse of any change of address within ten (10) days. The paying party shall also notify the Clerk/Clearinghouse of the names and addresses of the paying party's employers or other payors and, within ten (10) days, of any changes thereof.
- E. The costs of visitation-related travel/transportation shall be shared by the parties as follows:
 Father: _____ Mother: _____

F. ☐ Petitioner ☐ Respondent is responsible for providing medical and/or dental insurance for the child(ren).
☐ Petitioner ☐ Respondent shall pay _____% of any uninsured medical/dental expenses and the other party shall pay the remainder.

G. The parties shall:

☐ Exchange financial information such as copies of tax returns, earnings statements, and a Parent's Worksheet every 24 months.

☐ Exchange residential addresses and the names and addresses of their employers every 24 months.

☐ _____.

H. The court allocates the tax exemption(s) as follows:

Date

Judge or Commissioner

THE SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

(1) _____)
Petitioner/Plaintiff)
vs.)
(2) _____)
Respondent/Defendant)

(3) Case Number: _____

(4) ATLAS Number: _____

ORDER OF ASSIGNMENT

TO: Current and future employers or other payors of:

(5)

Name: _____ SSN: _____

This order modifies and replaces any previous "Order of Assignment" with the same case number.

You shall withhold court-ordered payments as follows:

Current Child Support	\$ _____
Current Spousal Maintenance/Support	\$ _____
Payments on Arrears / Interest	\$ _____
Clearinghouse Handling Fee	\$ _____ 2.25 per month*
TOTAL AMOUNT per month	\$ _____, but no more than

50% of disposable earnings (A.R.S. § 33-1131). *The Clearinghouse handling fee is set by statute and subject to change (A.R.S. § 25-510).

This **"Order of Assignment"** is effective immediately upon receipt by an employer or other payor, including self-employed persons, and continues until further Order, or until a period of 90 continuous days from the last payment to the Obligor. If you are again obligated to pay monies to the Obligor within 90 days, you are again bound by **this "Order of Assignment."** Payment must be sent to the Support Payment Clearinghouse within two (2) business days of the date the monies were withheld.

You shall NOT discharge or otherwise discipline the person named in this assignment, because of service of this "Order of Assignment."

The above ATLAS number and employee's name **must** appear on the *Transmittal Form or check*. Make payments payable and send to:

Support Payment Clearinghouse, P.O. Box 52107, Phoenix, AZ 85072-2107

Dated this _____ day of _____, 20____.

Judicial Officer or Clerk of Superior Court

CURRENT EMPLOYER INFORMATION

This form must be completed for:

- An ***“Order of Assignment”*** (Staple to the ***“Order of Assignment”***)
- ***“Order to Stop an Order of Assignment”*** (Staple to the Stop Order)
- ***“Notification of a Change of Employer”***

CASE NUMBER _____ ATLAS NUMBER _____

PAYOR NAME _____
(Name of Person to Make Payment)

Social Security Number _____

List only the Employer's Name and Payroll Address where the ***“Order of Assignment”*** or ***“Stop Order of Assignment”*** should be mailed.

CURRENT EMPLOYER NAME _____

PAYROLL ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER () _____ **FAX NUMBER ()** _____

PREVIOUS EMPLOYER (IF KNOWN) _____

PAYROLL ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE NUMBER () _____ **FAX NUMBER ()** _____

SUBMITTED BY _____ **DATE** _____

WA/FSC

TYPE OF W/A _____

DATE _____

TYPE OF ORDER _____

EMPLOYER STATUS _____

ENTERED BY _____

NEW W/A _____ SUB _____

AG _____ DCSE _____

Name of Person Filing Document: _____
Your Address: _____
Your City, State, Zip Code: _____
Your Telephone Number: _____
ATLAS Number (if applicable): _____
Attorney Bar Number (if applicable): _____
Representing ☐ Self (Without Attorney) OR ☐ Attorney for ☐ Petitioner OR ☐ Respondent

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

Name of Petitioner _____ Case Number _____
AND

Name of Respondent _____
☐ Mother
☐ Father

PARENTING PLAN

☐ FOR JOINT CUSTODY WITH JOINT
CUSTODY AGREEMENT OR
☐ SOLE CUSTODY

INSTRUCTIONS

This document has 3 parts: PART 1) General Information; PART 2) Custody and Parenting Time;
PART 3) Joint Custody Agreement.

One or both parents must complete and sign the Plan as follows:

- a. **If both parents agree to joint custody:** Both parents must sign the Plan at the end of PART 2 and at the end of PART 3;
- b. **If both parents agree to custody and parenting time arrangements but not to joint custody:** Both parents must sign the Plan at the end of PART 2;
- c. **If only one parent is submitting the Plan:** That parent must sign at the end of PART 2.

PART 1: GENERAL INFORMATION:

A. CHILDREN. This Plan concerns the following children: (Use additional paper if necessary)

B. CUSTODY ARRANGEMENTS REQUESTED IN THIS PLAN: The following custody arrangement is requested: (Check the box(es) that apply.)

- ☐ **JOINT LEGAL CUSTODY DETERMINATION DEFERRED:** The parent's request for joint legal custody is deferred to the court for determination. **OR,**
☐ **JOINT LEGAL CUSTODY AGREEMENT:** The parents agree to joint legal custody and request the court to approve the joint legal custody arrangement as described in this Plan,
OR
☐ Mother or ☐ Father will be the primary custodial parent

☐ **SOLE LEGAL CUSTODY AGREEMENT:** The parents agree that ☐ Mother or ☐ Father will be the parent with sole legal custody and shall be the primary custodial parent. The parents agree that since each has a unique contribution to offer to the growth and development of their child(ren), each of them will continue to have a full and active role in providing a sound moral, social, economic, and educational environment for the benefit of the child(ren), as described in the following pages. **OR,**

☐ **SOLE LEGAL CUSTODY REQUESTED BY THE PARENT SUBMITTING THIS PLAN:** The parents cannot agree to the terms of custody and parenting time. The parent submitting this Plan asks the court to order custody and parenting time according to this Plan.

☐ **RESTRICTED, SUPERVISED, OR NO PARENTING TIME:** The parent submitting this Plan asks the court for an order restricting parenting time. The facts and information related to this request are described in the Petition.

PART 2: CUSTODY AND PARENTING TIME. Complete each section below. Be specific about what you want the judge to approve in the court order.

A. WEEKDAY AND WEEKEND SCHEDULE: The time-sharing schedule will be as follows:

☐ The children will be in the care of Father as follows: (Explain).

☐ The children will be in the care of Mother as follows: (Explain).

☐ Other custody arrangements are as follows: (Explain).

☐ Transportation will be provided as follows:

☐ Mother or ☐ Father will pick the children up at _____ o'clock.

☐ Mother or ☐ Father will drop the children off at _____ o'clock.

Parents may change their time-share arrangements by mutual agreement with at least ____ days notice in advance to the other parent.

B. SUMMER MONTHS OR SCHOOL BREAK LONGER THAN 4 DAYS: The weekday and weekend schedule described above will apply for all 12 calendar months **EXCEPT:**

☐ During summer months or school breaks that last longer than 4 days, no changes shall be made. **OR,**

☐ During summer months or school breaks that last longer than 4 days, the child(ren) will be in the care of Father: (Explain.)

- ☐ During summer months or school breaks that last longer than 4 days, the child(ren) will be in the care of Mother: (Explain.) _____
- ☐ Each parent is entitled to a _____ week period of vacation time with the child(ren). The parents will work out the details of the vacation at least _____ days in advance.
- ☐ Should either parent travel out of the area with the child(ren), each parent will keep the other parent informed of travel plans, address(es), and telephone number(s) at which that parent and the child(ren) can be reached.
- ☐ Neither parent shall travel with the child(ren) outside Arizona for longer than _____ days without the prior written consent of the other parent or order of the court.

C. HOLIDAY SCHEDULE: The holiday schedule takes priority over the regular time-sharing schedule as described above. Check the box(es) that apply and indicate the years of the holiday access/ Parenting time schedule.

Holiday	Even Years	Odd Years
<input type="checkbox"/> New Year's Eve	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> New Year's Day	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Spring Vacation	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Easter	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> 4th of July	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Halloween	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Veteran's Day	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Thanksgiving	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Hanukkah	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Christmas Eve	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Christmas Day	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Winter Break	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Children's Birthdays	<input type="checkbox"/> Mother or <input type="checkbox"/> Father	<input type="checkbox"/> Mother or <input type="checkbox"/> Father
<input type="checkbox"/> Mother's Day will be celebrated with the Mother every year.		
<input type="checkbox"/> Father's Day will be celebrated with the Father every year.		
<input type="checkbox"/> Each parent may have the child(ren) on his or her birthday.		
<input type="checkbox"/> Three-day weekends which include Martin Luther King Day, Presidents' Day, Memorial Day, Labor Day, Columbus Day, the children will remain in the care of the parent who has the child(ren) for the weekend.		
<input type="checkbox"/> Other Holidays (Describe the other holidays and the arrangement.)		
<input type="checkbox"/> Each parent may have telephone contact with the child(ren) during the child(ren)'s normal waking hours.		
<input type="checkbox"/> Other (Explain) _____		

D. PARENTAL ACCESS TO RECORDS AND INFORMATION: Under Arizona law (A.R.S. §25-403), unless otherwise provided by court order or law, on reasonable request, both parents are entitled to have equal access to documents and other information concerning the child(ren)'s education and physical, mental, moral and emotional health including medical, school, police, court and other records. A person who does not comply with a reasonable request for these records shall reimburse the requesting parent for court costs and attorney fees incurred by that parent to make the other parent obey this request. A parent who attempts to restrict the release of documents or information by the custodian of the records without a prior court order is subject to legal sanctions.

E. EDUCATIONAL ARRANGEMENTS:

- ☐ Both parents have the right to participate in school conferences, events and activities, and the right to consult with teachers and other school personnel.
- ☐ Both parents will make major educational decisions together. If the parents do not reach an agreement, then the final decision making regarding educational decisions shall be with ☐ Mother OR ☐ Father after consultation with _____.

F. MEDICAL AND DENTAL ARRANGEMENTS:

- ☐ Both parents have the right to authorize emergency medical treatment, if needed, and the right to consult with physicians and other medical practitioners. Both parents agree to advise the other parent immediately of any emergency medical/dental care sought for the child(ren), to cooperate on health matters concerning the child(ren) and to keep one another reasonably informed. Both parents agree to keep each other informed as to names, addresses and telephone numbers of all medical/dental care providers.
- ☐ Both parents will make major medical decisions together, except for emergency situations as noted above. If the parents do not agree, then the final decision regarding medical issues will be with ☐ Mother OR ☐ Father after consultation _____.

G. RELIGIOUS EDUCATION ARRANGEMENTS:

- ☐ Each parent may take the child(ren) to a church or place of worship of his or her choice during the time that the child(ren) is/are in his or her care.
- ☐ Both parents agree that the child(ren) may be instructed in the _____ faith.
- ☐ Both parents agree that religious arrangements are not applicable to this plan.

H. ADDITIONAL ARRANGEMENTS AND COMMENTS:

- ☐ **NOTIFY OTHER PARENT OF ADDRESS CHANGE.** Each parent will inform the other parent of any change of address and/or phone number in advance **OR** within _____ days of the change.
- ☐ **NOTIFY OTHER PARENT OF EMERGENCY.** Both parents agree that each parent will promptly inform the other parent of any emergency or other important event that involves the child(ren).
- ☐ **TALK TO OTHER PARENT ABOUT EXTRA ACTIVITIES.** Each parent will consult and agree with the other parent regarding any extra activity that affects the child(ren)'s access to the other parent.
- ☐ **ASK OTHER PARENT IF HE/SHE WANTS TO TAKE CARE OF CHILD(REN).** Each parent agrees to consider the other parent as care-provider for the child(ren) before making other arrangements.
- ☐ **OBTAIN WRITTEN CONSENT BEFORE MOVING.** Neither parent will move with the child(ren) out of the Phoenix metropolitan area without prior written consent of the other parent, or a court ordered Parenting Plan.
- ☐ **COMMUNICATE.** Each parent agrees that all communications regarding the child(ren) will be between the parents and that they will **not** use the child(ren) to convey information or to set up parenting time changes.
- ☐ **PRAISE OTHER PARENT.** Each parent agrees to encourage love and respect between the child(ren) and the other parent, and neither parent shall do anything that may hurt the other parent's relationship with the child(ren).
- ☐ **COOPERATE AND WORK TOGETHER.** Both parents agree to exert their best efforts to work cooperatively in future plans consistent with the best interests of the child(ren) and to amicably resolve such disputes as may arise.
- ☐ **PARENTING PLAN.** Both parents agree that if either parent moves out of the area and returns later, they will use the most recent ***"Parenting Plan/Access Agreement"*** in place before the move

- ☐ or the minimum Maricopa County Access Guidelines until other arrangements can be worked out.
- ☐ **NOTIFY OTHER PARENT OF PROBLEMS WITH TIME-SHARING AHEAD OF TIME.** If either parent is unable to follow through with the time-sharing arrangements involving the child(ren), that parent will notify the other parent as soon as possible.
- ☐ **MEDIATION.** If the parents are unable to reach a mutual agreement regarding a legal change to their parenting orders, they may request mediation through the court or a private mediator of their choice.
- ☐ **DO NOT DEVIATE FROM PLAN UNTIL DISPUTE IS RESOLVED.** Both parents are advised that while a dispute is being resolved, neither parent shall deviate from this Parenting Plan, or Act in such a way that is inconsistent with the terms of this agreement.

NOTICE TO PARENTS: Once this Plan has been made an order of the court, if either parent disobeys the court order related to parenting time with the child(ren), the other parent may submit court papers to Expedited Parenting Time Services for possible enforcement. See the Self-Service Center materials for help.

I. SIGNATURE OF BOTH PARTIES

Signature of Mother: _____ Date: _____

Signature of Father: _____ Date: _____

PART 3: JOINT CUSTODY AGREEMENT (IF APPLICABLE):

- A.** ☐ **JOINT CUSTODY AGREEMENT:** If the parents have agreed to joint custody, the following will apply, subject to approval by the judge:
- 1. REVIEW PARENTING PLAN.** The parents agree to review the terms of the joint custody agreement and make any necessary or desired changes every _____ months from the date of this document.
 - 2. CRITERIA.** Our joint custody agreement meets the criteria required by Arizona law (A.R.S. §25-403):
 - a.** The best interests of the child(ren) are served;
 - b.** Each parent's rights and responsibilities for personal care of the child(ren) and for decisions in education, health care and religious training are designated in this Plan;
 - c.** A schedule of the physical residence of the child(ren), including holidays and school vacations is included in the Plan;
 - d.** The Plan includes a procedure for periodic review;
 - e.** The Plan includes a procedure by which proposed changes, disputes and alleged breaches may be mediated or resolved;
 - f.** The parties understand that joint custody does not necessarily mean equal parenting time.

B. SIGNATURE OF BOTH PARENTS REQUESTING JOINT CUSTODY

Signature of Mother: _____ Date: _____

Signature of Father: _____ Date: _____

Case No. _____

ATLAS No. _____

JUDGMENT DATA SHEET (FOR INTERNAL USE ONLY*)

ATTENTION: COURT DIVISION AND STAFF. DO NOT FILE THIS DOCUMENT. DO NOT DISTRIBUTE THE COMPLETED JUDGMENT DATA SHEET TO THE PARTIES. THIS FORM IS FOR CLERK OF COURT INTERNAL USE ONLY.

PERSON TO RECEIVE PAYMENTS:

Name: _____

Gender: ☐ Male ☐ Female Date of Birth: _____

SSN: _____

Mailing Address: _____

Daytime Phone: _____

Evening Phone: _____

Other (cell, pager): _____

Email Address: _____

PERSON TO MAKE PAYMENTS:

Name: _____

Gender: ☐ Male ☐ Female Date of Birth: _____

SSN: _____

Mailing Address: _____

Daytime Phone: _____

Evening Phone: _____

Other (cell, pager): _____

Email Address: _____

EMPLOYER INFORMATION FOR PERSON MAKING PAYMENTS: Firm Name: _____

Payroll Mailing Address: _____

Phone: _____

Email Address: _____

CHILDREN:

Name	Gender (M/F)	Date of Birth	Social Security No. (if available)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

☐ Additional children listed on attached sheet.

FOR COURT USE ONLY

Order Date: _____	Type of Order: _____			
Current Child Support	Arrearages	Current Spousal Maint.	Arrearages	Miscellaneous
Amount _____	Amount _____	Amount _____	Amount _____	Med Ins _____
Frequency _____	Frequency _____	Frequency _____	Frequency _____	Frequency _____
Due Date _____	Total _____	Total _____	Total _____	Med Bills _____
	Thru Date _____	Due Date _____	Thru Date _____	Frequency _____
	Due Date _____		Due Date _____	Due Date _____